



Application for MS4 Stormwater Quality Discharge Permit for Construction Projects

Complete all sections of the application, print or type all information.

APPLICANT IS: OWNER/DEVELOPER CONTRACTOR RENEWAL

Name and Contact Information for Applicant:

Company Name: _____
Street Address: _____
City, State and Zip Code: _____
Legally Responsible Person: _____
E-Mail Address: _____
Phone #: _____
SWMP Administrator: _____ Title/Position: _____
SWMP Administrator Phone _____
SWMP Administrator E-Mail: _____

1. Name and Contact Information for Owner/Developer or Contractor, not Listed in 1. above:

Company Name: _____
Street Address: _____
City, State and Zip Code: _____
Legally Responsible Person: _____
E-Mail Address: _____
Phone #: _____

2. Construction Activity Information:

Street Address or Nearest Cross Streets: _____
Name of Subdivision / Project, or Activity: _____
Total Area of Project Site: _____ Acres _____
Area of Project to Undergo Land Disturbance: _____ Acres
Is This Activity Part of a Larger Common Plan of Development: _____ Yes _____ No

5. Nature of Construction Activity

Single family Residential City Project
 Multi-Family Residential Utility Project
 Commercial Development Roadway

6. **Anticipated Start Date:** _____ **End Date:** _____

Complete Application and submit to the City of Evans Engineering Division with:

- ✓ ORIGINAL SIGNATURES IN INK
- ✓ APPROVED PROBABLE COST SHEET(S)
- ✓ FISCAL SECURITY
- ✓ \$500 CHECK FOR 3 YEARS COVERAGE

City of Evans, Engineering Division
1100 37th Street
Evans, CO 80620

All City of Evans MS4 stormwater quality discharge permit holders are required to retain a hard copy of the City of Evans MS4 Stormwater Program for Construction Projects Manual on the jobsite at all times for reference and direction on the Requirements and Processes of the permitting requirements for all Construction Projects.

Signatures for both the Owner and the Contractor are required for original and renewal applications.

By signing below, you attest that you have reviewed the information contained within the City of Evans MS4 Stormwater Program for Construction Projects and accept responsibility for the requirements set forth.

Signature of Legally Responsible **Owner**

Date Signed

Printed Name

Title

Signature of Legally Responsible **Contractor**

Date Signed

Printed Name

Title

Signature of City of Evans **City Engineer**

Date Signed

Approved Fiscal Security Amount: \$ _____

This Application is Subject to Review and Verification of All Submitted Information and Subsequent Approval by The City of Evans.